Tu PAC, Inc. 9/8/14

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463 RECEIVED
314 SEP 18 AM 8: 45
FEC MAIL CENTER

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

John B. Koch, Jr., Treasurer

oh B. Koch, Sr.

## 1403-129-3011

FEC FORM 1

## STATEMENT OF ORGANIZATION

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NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5EC MAIL CENTER
$T_{1} u_{1} P_{1} A_{1} C_{1}, I_{n} c_{1}.$			
ADDRESS (number and street)	2,2,2,3, ,S, ,B,e	$\lfloor n \rfloor d \lfloor e \rfloor l \rfloor o \rfloor w \rfloor \rfloor T \rfloor r \rfloor l$	
☐ ◀ (Check if address is changed)			
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COMMITTEE'S E-MAIL ADDRES	SS		
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	Optional Second E-Mail Ad	idress	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		
(Check if address is changed)			
is changed)			
2. DATE 0 9 ' 0	8 2 0 1 4		
3. FEC IDENTIFICATION NU	ЈМВЕР ▶ С		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	·
I certify that I have examined th	nis Statement and to the bes	t of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	<u> </u>	óch, Jr.	
Signature of Treasurer	on B. Kall,	Sr.	Date DG COS COS
NOTE: Submission of false, errone		n may subject the person signing to TION SHOULD BE REPORTED W	this Statement to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530	EEL, EURW I

FEC	Form 1 (Revised 02/2009)	Page 2					
5. TYPE O							
F	ate Committee:	halaw)					
(a) <b>[</b>	This committee is a principal campaign committee. (Complete the candidate information	below.)					
(b)	This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate					
Name of Candidat		<u></u>					
Candidat Party Aff		Stateident					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized commi	ittee.					
Name of Candidat							
Party C	Party Committee:						
(d)	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)						
Politica	al Action Committee (PAC):	·					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.	) Its connected organization is a:					
	Corporation Corporation w/o Capital Stock	Labor Organization					
	Membership Organization Trade Association	Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
(f)	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or procommittee. (i.e., nonconnected committee)						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint F	oint Fundraising Representative:						
(g) [	This committee collects contributions, pays fundraising expenses and disburses net procee committees/organizations, at least one of which is an authorized committee of a federal car						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.						
C	Committees Participating in Joint Fundraiser						
1	I I I I I I I I I I I I I I I I I I I						
2	. [ ]   ]   FEC ID number C						
3	. [           FEC ID number C						
4	FEC ID number						

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	FEC Form 1 (Revised C		Page 3	
V	Vrite or Type Committee Name			
 6.	Name of Any Connected C	Prganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nin PAC Sponsor	
0.	Name of Any Connected C	rganization, Anniated Committee, Joint Fundraising Representative, of Leadersi	np PAC Sponsor	
L				
L				
	Mailing Address			
	•			
		CITY STATE	ZIP CODE	
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	derehin PAC Sponsor	
	rtelationship.	Annialed Committee Joint 1 undraising Nepresentative		
7.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in pos	session of committee	
	Full Name T <sub>1</sub> r <sub>1</sub> e <sub>1</sub> a	$u_1s_1u_1r_1e_1r_1$		
	Mailing Address		<u> </u>	
			ـــا-لـــ	
	Title or Position	CITY STATE	ZIP CODE	
	<u> </u>			
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	me and address of	
	Full Name of Treasurer	u BuKoch, Ur. III.		
		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	2 <sub>1</sub> 9 <sub>1</sub> -[5 <sub>1</sub> 9 <sub>1</sub> 3 <sub>1</sub> 8 ZIP CODE	
	Title or Position		1 1	
	H <sub>1</sub> e <sub>1</sub> a <sub>1</sub> d <sub>1</sub> M <sub>1</sub> a <sub>1</sub> k <sub>1</sub> a <sub>1</sub>	V <sub>I</sub> e <sub>I</sub> l <sub>I</sub> i <sub>I</sub> Telephone number		

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CITY

STATE

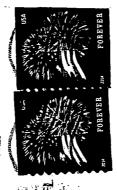
ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

140% - 129 - NO14

Mailing Address



SAINT PETERSBURG FL D. S.EP. 2014 P.E.A.L.

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federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

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(8/2013)

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